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***	Application or Docket Number 60586-300601  Effective October 1, 2000													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL E	NTITY	OR	OTHER SMALL			
то	TAL CLAIMS		4	<i>,</i> –				RATE	FEE		RATE	FEE		
FO	R		NUMBER	FILED	NUMB	ER EXTRA		BASIC FEI	355.00	OR	BASIC FEE	710.00		
то	TAL CHARGEA	BLE CLAIMS	6 mir	ius 20=	•	J		X\$ 9=		OR	X\$18=			
IND	EPENDENT CL	AIMS	/ minus 3 = * /					X40=		OR	X80=			
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT			Δ		+135=		OR	+270=	270	00	I
• If	* If the difference in column 1 is less than zero, enter "0" in column 2									OR	TOTAL	980		I
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								TOTAL	ENTITY	OR	OTHER SMALL			
AMENDMENT A	.90	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	EST BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		Ţ
MQ.	Total	. 9	Minus		0	=		X\$ 9=		OR	X\$18=		ر	Ď
MEN	Independent	・ ろ	Minus	2	3	=		X40=		OR	X80=			M
٩	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN'	T CLAIM			+135=		OR	+270=			
								TOTAL		4	TOTAL ADDIT. FEE			4
		(Column 1)		(Colu	mn 2)	(Column 3)		ADDIT. FEE	<u> </u>	<b>J</b> • · · ·	ADDII. FEE		_	_ 1
MENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	IEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
DME	Total	•	Minus	••		=		X\$ 9=		OR	X\$18=			4
AMEND	Independent	•	Minus	***		=		X40=		OR	X80=			
_	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM			+135=		1	+270=			
								TOTAL ADDIT. FEE	:	OR OR	TOTAL ADDIT. FEE			
(Column 1) (Column 2) (Column 3)								AUUII. FEE		-	AUUII. FEE			
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
ΘM	Total	•	Minus			=		X\$ 9=		OR	X\$18=			
AMENDMENT	Independent	•	Minus	•••		=	-	X40=		OR	X80=		1	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=	1	OR	+270=			
•	If the entry in colu	mn 1 is less than t	he entry in col	umn 2, writ	te "0" in co	olumn 3.		TOTAL		1	TOTAL		1	
•••	If the "Highost No	mber Previously P imber Previously F nber Previously Pa	Paid For IN TH	IS SPACE	is less th	an 3. enter "3."		ADDIT. FEE		OR	ADDIT. FEE lumn 1.	L	1	